1					tori	ney's Docket No:				
	RIZATION / A	MENDM	ENT TRANSM		R	SYNE-225-E				
Serial No.		Filing [Examiner		Group Art Unit				
08/182,183		Ma	y 23, 1994	Allen,	М.	1812				
In Re Application of: Lin, et al.										
For: GLIAL CELL LINE-DERIVED NEUROTROPHIC FACTOR										
TO THE ASSISTANT COMMISSIONER FOR PATENTS:										
☐ Applicant(s) petition(s) for the following extension of time under 37 C.F.R. 1.136(a):										
☐ On	☐ One month of original due date (\$110.00)									
□ Tw										
☑ Three months of original due date (\$930.00)										
Four months of original due date (\$1,470.00)										
☐ Four months of original due date (\$1,476.66) ☐ This response is a First Submission After Final under 37 C.F.R. §1.129, and is filed herewith.										
☐ The accompanying papers include amended claims for which no additional fee is required.										
☐ The accompanying papers include amended claims the fee for which has been calculated as										
follow		eta IIICID	ide amended cia:	1113 1110 100 101	Willow Has	Deen dalocialos as				
		 	CLAIMS AS AI	MENDED						
(1)	(2)	(3)	(4)	(5)	(6)	(7)				
	Claims	, -,	Highest number	No. of extra	Rate	Additional				
	remaining after		previously paid for	daims present		Fee				
Total Claims	amendment 61 40	Minus	74 =	present 0	x \$22	· = 0				
Indep. Claims	8	Minus	15 =	0	x \$80	= 0				
11.005. 012.1110			onal Fee for this	Amendment						
*If the entry in co			ntry in column 4, w		nn 5.					
						n this space.				
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.										
☑ The following the property of the prope	llowing fees are	incurred	by the accompa	anying papers.		•				
☑ First Submission After Final Rejection Under 37 C.F.R. §1.129(a) \$770.00										
Please charge Deposit Account No. 01-0519 in the name of Amgen Inc. in the amount of \$1700.00										
A duplicate copy of this petition is attached.										
If an additional extension of time is required, please consider this a petition therefore.										
☑ The Commissioner is hereby authorized to charge any additional fees which may be required by the accompanying papers, or credit any overpayment to Deposit Account No. 01-0519.										
Please Send Future Correspondence To:										
U.S. Patent Operations/DRC										
M/S 10-1-B Daniel R. Curry										
AMGEN INC.			Α	Attorney for Applicants						
Amgen Center			R	Registration No.: 32,727						
1840 De Havilland Drive Phone: (805) 447-8102										
Thousand Oaks	housand Oaks, California 91320-1789 Date: December 26, 1996									

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Assistant Commissioner for Patients, Washington, D.C. 20231, on the date appearing palow.

December 26, 1996

ttorney's Docket No: FEE AUTHORIZATION / AMENDMENT TRANSMITTAL LETTER SYNE-225-E										
Serial No.		Filing Date		Examiner		Group Art Unit				
08/182,183		May 23, 1994		Allen, M.		1812				
In Re Application of: Lin, et al.										
For: GLIAL CELL LINE-DERIVED NEUROTROPHIC FACTOR										
TO THE ASSISTANT COMMISSIONER FOR PATENTS:										
			following extens	ion of time u	nder 37 C.	F.R. 1.136(a):				
☐ One	e month of origin	nal due	date (\$110.00)		100					
· D Two	o months of orig	jinal due	date (\$390.00)	•						
⊠ Thr	ee months of o	riginal d	ue date (\$930.0	00)						
		-				*				
☐ Four months of original due date (\$1,470.00) ☐ This response is a First Submission After Final under 37 C.F.R. §1.129, and is filed herewith.										
	* 154 1 5 15			•						
	, , , , ,	ers inclu	ide amended clair	ns the fee for	which has	been calculated as				
follow	s:					P				
			CLAIMS AS AN							
(1)	(2)	(3)	(4)	(5) No. of extra	(6) Rate	(7) Additional				
_	Claims remaining after		Highest number previously paid	daims	Nate	Fee				
	amendment		for	present						
Total Claims	61	Minus	74 =	0	x \$22	= 0 =				
Indep. Claims	8	Minus	15 =	0	x \$80	= 0				
	Tot	al Additi	onal Fee for this	Amendment						
*If the entry in co	olumn 2 is less th	an:the er	ntry in column 4, w	rite "0" in colun	nn 5.					
			" IN THIS SPACE I			n this space.				
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.										
☐ The following fees are incurred by the accompanying papers.										
☑ First Submission After Final Rejection Under 37 C.F.R. §1:129(a) \$770.00										
Please charge Deposit Account No. 01-0519 in the name of Amgen Inc. in the amount of \$1700.00										
A duplicate copy of this petition is attached.										
If an additional extension of time is required, please consider this a petition therefore.										
The Commissioner is hereby authorized to charge any additional fees which may be required										
by the accompanying papers, or credit any overpayment to Deposit Account No. 01-0519.										
Plance Sand Future Correspondence To:										
Please Send Future Correspondence To: U.S. Patent Operations/DRC										
U.S. Patent Operations/DRC M/S 10-1-B Daniel R. Curry										
AMGEN INC.				Attorney for Applicants						
Amgen Center	•			Registration No.: 32,727						
1840 De Havilla	and Drive		Phone: (805) 447-8102							
	s, California 913	320-1789		Date: December 26, 1996						

CERTIFICATE OF MAILING

December 26, 1996

THE PATENT OFFICE IS HEREBY REQUESTED TO ACKNOWLEDGE RECEIPT OF THE FOLLOWING DOCUMENTS BY DATE STAMPING AND RETURNING THIS POST CARD.

Serial No.: 08/182,183

Applicant: Lin et al.

Filed: May 23, 1994

Examiner: M. Allen

Art Unit: 1812

Title: GLIAL CELL LINE-DERIVED NEUROTROPHIC FACTOR

1 pg Fee Authorization/Transmittal Letter + 1 copy 20 pgs First Submission After Final Rejection + 3 afterhments

12/30/96

SYNE-225-E DRC/khh

Via First Class Mail

December 26, 1996

Amgen Inc. 1840 DeHavilland Drive Thousand Oaks, CA 91320-1789



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